

# **NATIONAL CENTER FOR CHRONIC DISEASE PREVENTION AND HEALTH PROMOTION (HCL)**

Plans, directs, and coordinates a national program for the prevention of premature mortality, morbidity, and disability due to chronic illnesses and conditions and promotes the overall health of the population. In carrying out this mission, the Center: (1) Plans, directs, and conducts epidemiologic, behavioral, and laboratory investigations, technology translation, demonstrations, and programs directed toward the definition, prevention, and control of chronic diseases, promoting healthy behaviors and practices, and promoting reproductive health in conjunction with State health agencies; (2) provides leadership in the development, evaluation, and dissemination of effective health promotion, school health education, and risk reduction programs; (3) plans, develops, and maintains systems of surveillance for chronic diseases and conditions, and behavioral and other risk factors; (4) conducts epidemiologic and behavioral investigations and demonstrations related to major personal health practices and behaviors, including tobacco use, nutrition, family planning, alcohol use, and exercise in conjunction with State health agencies; (5) plans, directs, and conducts epidemiologic and evaluative investigations related to issues of access, utilization, and quality of health services aimed at the prevention and control of chronic diseases and conditions and selected adverse reproductive outcomes; (6) serves as the primary focus for assisting States and localities through grants, cooperative agreements, and other mechanisms, in establishing and maintaining chronic disease prevention and control and health promotion programs; (7) provides training and technical consultation and assistance to States and localities in planning, establishing, maintaining, and evaluating prevention and control strategies for selected chronic disease and health promotion activities; (8) plans, coordinates, and conducts laboratory activities related to selected chronic diseases with State and local health departments, other organizations, and other CDC programs; (9) provides technical consultation and assistance to other nations in the development and implementation of programs related to chronic disease prevention and control, health promotion, school health education, and selected adverse reproductive outcomes; (10) and in carrying out the above functions, collaborates as appropriate with other Centers and offices of CDC, other PHS agencies, domestic and international public health agencies, and voluntary and professional health organizations.

## **Office of the Director (HCL1)**

(1) Manages, directs, coordinates, and evaluates the activities of the National Center for Chronic Disease Prevention and Health Promotion (NCCDPHP); (2) develops goals and objectives and provides leadership, policy formation, scientific oversight, and guidance in program planning and development; (3) coordinates assistance provided by NCCDPHP to other CDC components, other Federal, State, and local government agencies, the private sector, and other nations; (4) provides and coordinates administrative support services for NCCDPHP requirements, including guidance and coordination for grants, cooperative agreements, and other assistance mechanisms; (5) provides administrative support and coordinates technical consultation and assistance for the Preventive Health and Health Services Block Grant; (6) coordinates, manages, and conducts analyses of broad-based surveillance activities in support of programs carried out by various NCCDPHP components; (7) coordinates the recruitment, assignment, technical supervision, and career development for staff, including field assignees, with emphasis on goals for affirmative action; (8) coordinates all NCCDPHP international activities; (9) provides technical information services to facilitate dissemination of significant information to NCCDPHP staff, various Federal, State, and local health agencies, professional and voluntary organizations, and through them to selected target populations; (10) and in carrying out the above functions, collaborates, as appropriate, with other Centers/Institute/Offices of CDC, other PHS agencies, and other Federal agencies.

## **Program Services Branch (HCL17)**

(1) Establishes strategic goals and tactical objectives for the development of funding mechanisms for intramural and extramural program activities; (2) provides leadership, planning, coordination, advice, and guidance in the execution and maintenance of the Center's budget and administrative functions; (3) assists in the development of NCCDPHP programs focusing on chronic disease prevention and health promotion priorities and needs, in conjunction with other components of the Center, and other governmental and non-governmental agencies and organizations; (4) plans, develops, and implements Center-wide policies, procedures, and practices for administrative management, acquisition and assistance mechanisms, including contracts and memoranda of agreement, discretionary and block grants, and cooperative agreements; (5) analyzes, evaluates, reviews, and develops recommendations for policies and procedures in the areas of fiscal, human, and facility resources; (6) provides and coordinates

Center-wide administrative management and support services for fiscal management, personnel, travel, and other administrative areas; (7) plans, coordinates, and implements management information procedures and systems; (8) provides Center-wide management information for fiscal and extramural inquiries, and advises Center staff on programmatic, administrative, and fiscal data collection, reporting, and analytical methods; (9) plans, coordinates, and implements training for the Divisions' administrative personnel; (10) provides guidance, support, and assistance in recruitment and staff development; (11) monitors, advises, and provides guidance in the allocation of FTE, discretionary funds, budget execution, and preparation of management reports; (12) develops Program Announcements and Requests for Assistance in collaboration with NCCDPHP program entities and the Procurement and Grants Office, and coordinates reviews for scientific and programmatic merit and relevance to health promotion and chronic disease prevention; (13) reviews Center-wide acquisition and assistance operations to ensure adherence to law, policies, procedures, and regulations; (14) coordinates NCCDPHP requirements relating to small purchase procurement, materiel management, and interagency agreements; (15) in the conduct of these activities, maintains liaison with other CDC Centers/Institute/Offices, HHS, and other Federal agencies. (Approved: 9/14/98)

#### Technical Information and Editorial Services Branch (HCL16)

The Technical Information and Editorial Services Branch (TIESB) (1) plans, coordinates, develops, and provides NCCDPHP technical information and editorial resources and services; (2) provides technical information acquisition, tracking, manual and electronic search services, retrieval, and reference collection services; (3) plans, coordinates, advises, and provides information management support and technical assistance to NCCDPHP divisions and their constituents to develop technical information systems and resources to meet division goals and programmatic directions; (4) develops and coordinates NCCDPHP technical information resources into computerized information databases and special bibliographies or publications; (5) works closely with state and federal agencies and NCCDPHP constituents to develop health information networks and to promote information sharing; (6) manages and coordinates NCCDPHP's scientific and editorial clearance process and DHHS clearance, as appropriate, for all print and nonprint materials, and ensures adherence to and consistency with CDC's scientific and editorial clearance process; (7) edits, writes, designs, develops, and coordinates the publication of communication material, including journal articles, books, reports, fact sheets, newsletters, and other forms of communication with the public health community and the general public; (8) provides leadership in the production of quality print and nonprint materials by planning and presenting seminars, by providing consultation in developing written and visual materials, and by otherwise promoting good communications practices; (9) establishes standards and coordinates the design and layout of print and nonprint materials, including tabular and graphic materials, advises NCCDPHP staff on desktop publishing, and provides desktop publishing services; (10) coordinates other publication services, such as preparing indexes, verifying reference lists, testing for readability, and translating materials from English to non-English language; (11) develops, manages, and maintains the NCCDPHP manuscript tracking system, providing an up-to-date reporting system, bibliographies of NCCDPHP publications, and input into NCCDPHP, CDC and DHHS online locator and database systems; (12) coordinates NCCDPHP's technical information, editorial, and other communication activities with other CDC programs and offices; (13) represents NCCDPHP on committees, workgroups, and at conferences relating to technical information, publication activities, and other communication activities. (Approved 7/22/96)

#### Division of Adolescent and School Health (HCL2)

(1) Administers a program of comprehensive school health education with emphasis on adolescent health issues; (2) identifies priority health risks among adolescent populations, including behaviors that result in elevated risk of the development of cardiovascular diseases and cancer, transmission of human immunodeficiency virus/acquired immunodeficiency syndrome (HIV/AIDS), or that result in mortality, morbidity, and disability either during adolescence or adulthood; (3) in coordination with the Office of Surveillance and Analysis and other NCCDPHP components, develops and supports national, State, and local surveillance systems to monitor priority health risks among school and adolescent populations; (4) conducts epidemiologic studies to identify principal determinants of priority health risks among adolescent populations; (5) develops, evaluates, and disseminates interventions to reduce high-priority health risks among adolescent populations; (6) assists State and local agencies to implement and assess school- and community-based interventions to reduce high-priority health risks among adolescent populations that attend school and among adolescent populations that do not; (7) administers a program of cooperative agreements and grants to schools, colleges, and related educational organizations to

promote and disseminate effective school health education about HIV/AIDS prevention; (8) assists the nation's schools and colleges in protecting and improving the health of students, faculty, and staff through comprehensive school health education, and related school health and social services; (9) assists other nations in reducing health risks among adolescent populations and in implementing and improving school health programs; (10) and in accomplishing the functions listed above, collaborates with other components of CDC, PHS, and HHS; the U.S. Department of Education and other federal agencies; national professional, voluntary, and philanthropic organizations; international agencies; and other organizations as appropriate.

#### Office of the Director (HCL21)

(1) Establishes and interprets policies; (2) determines program priorities associated with health risks among adolescent populations, including behaviors related to HIV/AIDS, unplanned teenage pregnancy, use of tobacco, alcohol and drug use, cardiovascular disease, cancer, and other health problems; (3) plans Division activities including the organization of personnel and the use of financial resources; (4) establishes standards for quality control; (5) monitors progress toward achieving program objectives; (6) assesses the impact of Division activities in protecting and improving the health of school- and college-aged youth; (7) reports accomplishments, future directions, and resource requirements; (8) coordinates activities within the Division, between the Division and other units of NCCDPHP and CDC, and with other agencies in the public and private sectors; (9) represents the Division at official, professional, and scientific meetings.

#### Program Development and Services Branch (HCL22)

(1) Uses research findings to develop and improve the impact of school and community interventions designed to reduce priority health risks among adolescent and youth populations, and to promote changes in behaviors related to Human Immunodeficiency Virus/AIDS, other sexually transmitted diseases, and unplanned teenage pregnancy; (2) develops, describes, and disseminates interventions for use by relevant agencies to reduce priority health risks among school- and college-aged populations, with specific emphasis on reduction of risk for HIV/AIDS and other sexually transmitted diseases; (3) assists State and local education and health departments, national organizations, and other relevant agencies to implement broad scale school- and community-based interventions to reduce priority health risks among school- and college-aged populations; (4) assists the Nation's schools and colleges in protecting and improving the health of students, faculty, and staff through school health education, and other integrated school- and community-based programs, and related school health and social services, with specific emphasis on reduction of risk for HIV/AIDS and other sexually transmitted diseases; (5) assists other nations in strengthening the effectiveness of school and out-of-school programs to safeguard or improve the health of students, faculty, and staff; (6) collaborates with other components within CDC, PHS, and DHHS; the U.S. Department of Education and other Federal agencies; national professional, voluntary, and philanthropic organizations; and international agencies. (Approved: March 5, 1993)

#### Research Application Branch (HCL24)

(1) Provides leadership and consultation to develop and improve the impact of interventions designed to reduce priority health risks among adolescents and youth populations from issues such as tobacco use, sedentary lifestyle, dietary patterns that result in disease, intentional and non-intentional injury, alcohol and other drug abuse, and lack of health services; (2) provides leadership and consultation necessary for development, description, and dissemination of interventions and guidelines for use by relevant agencies to reduce priority health risks among school- and college-aged populations; (3) provides consultation in planning for CDC role in all components of a comprehensive school health program, including school linked health and social services; (4) assists state and local education and health departments and other relevant agencies to implement school- and community-based demonstration interventions to reduce priority health risks among school- and college-aged populations; (5) assists other Nations in strengthening the effectiveness of school and out-of-school programs to safeguard or improve the health of students, faculty, and staff; (6) collaborates with other components within CDC, PHS, and DHHS; the U.S. Department of Education and other Federal agencies; national professional, voluntary, and philanthropic organizations; and international agencies. (Approved: January 26, 2001)

#### Surveillance and Evaluation Research Branch (HCL23)

(1) Identifies priority health risks among populations of adolescents and youth (e.g., behaviors that result

in HIV infection, unplanned teenage pregnancy, smoking, alcohol and drug usage, cardiovascular disease, cancer, and other health problems) that result in mortality, morbidity, and disability either during youth or during adulthood; (2) develops and supports national, State, and local surveillance systems to monitor priority health risks among adolescent and youth populations; (3) conducts research to identify principal determinants of priority health risks among adolescents and youth populations; (4) evaluates the effectiveness and impact of school- and community-based interventions to reduce priority health risks among adolescent and youth populations; (5) synthesizes and describes the results of surveillance and evaluation research to improve the impact of interventions designed to reduce priority risks among adolescent and youth populations; (6) assists other nations in conducting surveillance and evaluation research or interventions to reduce priority health risks among adolescent and youth populations; (7) assists other nations in strengthening the effectiveness of school and out-of-school programs to safeguard or improve the health of students, faculty, and staff; (8) in accomplishing the functions listed above, collaborates with other components within CDC, PHS, and DHHS; the U.S. Department of Education and other Federal agencies; national professional, voluntary, and philanthropic organizations; academic institutions, private organization, and international agencies. (Approved: March 5, 1993)

#### Division of Cancer Prevention and Control (HCL8)

(1) Plans, directs, and supports prevention, early detection, and control programs for cancer, based upon policy, research, and public health practice; (2) directs, monitors, and reports on activities associated with the implementation of Public Law 101-354: "The Breast and Cervical Cancer Mortality Prevention Act of 1990"; (3) plans, directs, and supports activities for monitoring the distribution and the determinants of cancer morbidity, survival, and mortality; (4) plans and conducts epidemiologic studies and evaluations to identify the feasibility and effectiveness of cancer prevention and control strategies; (5) develops public health strategies and guidelines to form the basis for community interventions in cancer prevention and control; (6) provides technical consultation, assistance, and training to state and local public health agencies in all components of early detection and control programs for cancer; (7) provides technical assistance and consultation to health care provider organizations related to the improved education, training, and skills in the prevention, detection and control of selected cancers; (8) identifies problems, needs, and opportunities related to modifiable behavioral and other risk factors, and recommends priorities for health education, health promotion, and cancer risk reduction activities; (9) plans, develops and maintains surveillance systems in collaboration with states, the Office of Surveillance and Analysis, and other Center components, and (10) coordinates activities as appropriate with other CDC organizations, PHS agencies, and related voluntary, international, and professional health organizations.

#### Office of the Director (HCL81)

(1) Establishes and interprets policies and determines program priorities; (2) provides leadership and guidance in program planning and development, program management, program evaluation, budget development, and Division operations; (3) monitors progress toward achieving Division objectives and assessing the impact of programs; (4) insures that Division activities are coordinated with other components of CDC both within and outside the Center; with Federal, state and local agencies; and related voluntary and professional organizations; (5) coordinates Division responses to requests for technical assistance or information on primary and secondary cancer prevention practices, behaviors and policies, including Division activities and programs; (6) provides administrative and logistic support for Division field staff; and (7) develops and produces communications tools and public affairs strategies to meet the needs of Division programs and mission.

#### Epidemiology and Health Services Research Branch (HCL82)

(1) designs, implements, and analyzes epidemiologic studies related to utilization and consequences of cancer screening and early detection; (2) provide technical support to State cancer control programs to design, collect and analyze data on the quality and effectiveness of cancer screening and early detection technologies, clinical strategies for those with abnormal screening results, cost and behavioral barriers to screening and follow-up, and determinants of cancer risk; (3) monitor trends in cancer screening to evaluate cancer control activities; (4) provide leadership in collaboration with other Federal, State, private and international agencies to assure the quality of cancer screening; (5) provide technical assistance and training to local State, and national organizations in data systems, research design, and evaluation of cancer control programs; (6) design and conduct other epidemiologic and clinical research

that contributes to scientific knowledge regarding cancer prevention and control. (Approved: 2/10/99)

#### Cancer Surveillance Branch (HCL83)

(1) provide technical support to states for the planning, implementation, and evaluation of population-based statewide central cancer registries; (2) collaborate with States and national organizations to set and implement standards for data quality, timeliness, and completeness for cancer case reporting; (3) assist States and national organizations to utilize cancer surveillance data to describe the state or national disease burden, evaluate cancer control activities, and identify populations at high risk of certain cancers; (4) provide technical assistance to States in the design and implementation of systems for, and analysis of, surveillance research related to cancer; (5) provide technical assistance and training to local, State, and national organizations in surveillance data systems; (6) support and manage comprehensive database systems to monitor progress of state cancer control programs; (7) provide leadership and expand collaborations with other Federal, State, local, voluntary, professional, and international organizations for all aspects of cancer surveillance. (Approved: 2/10/99)

#### Communications and Behavioral Science Branch (HCL85)

(1) conduct both qualitative and quantitative research to identify the determinants of cancer prevention and screening behaviors; (2) translate findings regarding cancer-related psychosocial factors into scientific presentations and publications; (3) utilize findings from research to develop effective communication messages, strategies, and programs; (4) develop health communication campaigns at the national and State levels; (5) guide the production and distribution of print, broadcast, and electronic materials for use in programs at the national and state levels; (6) provide leadership, consultation and technical assistance on communication and behavioral science issues for cancer prevention and control. (Approved: 2/10/99)

#### Program Services Branch (HCL84)

(1) Provides technical consultation and guidance to States and public health agencies in all components of the early detection and control programs for cancer; (2) monitors, tracks, and evaluates program activities in state-based cancer control programs; (3) recruits, trains, and supervises program consultants and public health advisors working with state health departments to implement cancer control programs; (4) assists in the design, implementation, and monitoring of management information systems for cancer control programs, and facilitates and coordinates the collection of data from cancer screening and follow-up activities; (5) conducts research to identify effective health education and program delivery training programs, and develops effective interventions to reach target populations; (6) evaluates and disseminates public education and training programs for cancer detection and control; (7) plans, develops, and implements training programs for all components of the early detection and control programs for cancer; (8) establishes and interprets policies and priorities in support of public education and training programs; (9) develops and maintains liaison and collaborative relationships with professional, community, and voluntary agencies involved in cancer control activities. (Approved: 10/13/93)

#### Division of Oral Health (HCL9)

(1) Provides a national and international focus for the prevention and control of oral diseases and conditions, and for the prevention and control of infectious diseases in dentistry; (2) provides assistance to state and local governments, professional, educational, voluntary, and community-based organizations through consultation, training, promotion, education, surveillance, and other technical services; (3) assists state and local governments and other organizations in evaluating dental, oral, and infectious disease prevention activities; (4) develops and implements oral health activities for underserved racial and ethnic minority populations; (5) collects, analyzes, summarizes, and distributes information on the status of dental public health programs; (6) conducts and evaluates operational research to develop improved methodology for oral disease prevention; (7) develops and conducts surveillance of dental and oral disease problems; (8) maintains liaison with other federal agencies, state and local health agencies, and national organizations and groups on oral health activities; (9) collaborates with other components of CDC and DHHS in carrying out programs. (Approved 10/2/97)

#### Office of the Director (HCL91)

(1) Manages, directs, and coordinates the activities of the Division of Oral Health (DOH); (2) provides leadership and guidance in policy formulation, program planning and development, program management and operations; (3) provides administrative, fiscal, procurement, and technical support for the division; (4) coordinates responses to all congressional, public, and Freedom of Information inquiries; (5) coordinates all clearance functions; (6) manages all personnel activities, including staff recruitment, assignment, and career development; (7) coordinates activities of the division with other components of CDC. (Approved 10/2/97)

#### Division of Adult and Community Health (HCL3)

(1) Develops and manages nationwide and State-based surveillance systems for chronic disease risk factors and health promotion activities; (2) develops and promotes community-based interventions and programs; (3) provides national and international leadership in health education and health promotion; (4) conducts studies to enhance public health activities in health services and managed care; (5) manages public health research, training, cooperative, and intervention activities in diverse settings such as cities, universities, State health departments, and other countries; (6) promotes the understanding and improvement of the determinants and issues related to cardiovascular health, aging, and epilepsy; (7) in cooperation with other components of NCCDPHP, coordinates activities with other Federal, State, and local governmental agencies, academia, and nongovernmental organizations. (Approved: 1/22/99)

#### Office of the Director (HCL31)

(1) Manages, coordinates, and evaluates the activities and programs of the Division; (2) ensures that Division activities are coordinated with other components of CDC both within and outside the Center, with Federal, State, and local health agencies, and with voluntary and professional health agencies; (3) provides leadership and coordinates Division responses to requests for research, consultation, training, collaboration, and technical assistance or information on managed care, health promotion, behavioral surveys, cardiovascular health, aging, epilepsy, and arthritis; (4) provides administrative, logistical, and management support for Division field staff; (5) provides administrative and management support for the Division including guidance on the organization of personnel and the use of financial resources, and oversight of grants, cooperative agreements, contracts, and reimbursable agreements. (Approved: March 19, 2002)

#### Behavioral Surveillance Branch (HCL32)

(1) Manages a nationwide program for State-specific surveillance of behavioral risk factors and other antecedents of health conditions, particularly chronic diseases; (2) provides support to build State capacity for telephone survey operations and data management, and for the analysis, dissemination, and use of the data by State agencies, and universities to set public health priorities and monitor public health programs; (3) develops guidelines and criteria for the assessment of behavioral risk factors in State and local populations; (4) analyzes and disseminates the results of analyses to policy and decision makers, public health professionals, and other relevant audiences through communication channels and formats appropriate to these constituencies; (5) coordinates analyses and use of survey methods to enhance behavioral risk factor data; (6) develops guidelines and criteria for monitoring public health policies directed at affecting behavioral and other risk factors leading to chronic diseases and other conditions; (7) promotes the broad use and application of Behavioral Risk Factors Surveillance Survey (BRFSS) results and findings through current information systems; (8) works closely with other Divisions in NCCDPHP and other CDC Centers/Institute/Offices (CIO's) to formulate a cross-cutting surveillance system for the States and CDC; (9) provides administrative and management support for the branch, including oversight of grants, cooperative agreements, contracts, and reimbursable agreements. (Approved: 1/22/99)

#### Health Care and Aging Studies Branch (HCL38)

(1) Coordinates and fosters research and programs in managed care settings for the Center; (2) reviews and develops policy for using health care settings as a focus for public health activities related to disease prevention and health promotion; (3) examines issues related to cost effectiveness in the management and care of chronic diseases; (4) assists in setting health care standards for prevention of chronic diseases; (5) studies potentially modifiable causes of chronic disease and conditions of older adults; (6) develops and evaluates measures of public health impact concerned with such issues as quality of life and disability adjusted life years; (7) assesses the health and economic burden of chronic diseases and

conditions in older adults through activities such as demographic, economic, and behavioral studies; (8) disseminates findings from research and program evaluations to policy and decision makers, public health professionals, and other relevant audiences through communication channels and formats appropriate to these constituencies; (9) provides administrative and management support for the branch, including oversight of grants, cooperative agreements, contracts, and reimbursable agreements. (Approved: 1/22/99)

#### Cardiovascular Health Branch (HCL33)

(1) Develops and evaluates effective interventions to be used by State and local health agencies and health care organizations to mitigate risk factors for cardiovascular disease; (2) conducts evaluation studies to document the efficacy and effectiveness of disease prevention and health promotion interventions; (3) provides leadership in the development of components and guidelines for effective chronic disease prevention and health promotion strategies related to cardiovascular disease; (4) provides consultation to State and local health agencies and health care delivery organizations in planning, establishing, and evaluating cardiovascular health activities; (5) carries out epidemiologic research related to the prevention of cardiovascular disease and improvement of cardiovascular health; (6) disseminates findings from research and program evaluations to policy and decision makers, public health professionals and other relevant audiences through communication channels and formats appropriate to these constituencies; (7) provides administrative and management support for the branch, including oversight of grants, cooperative agreements, contracts, and reimbursable agreements. (Approved: 1/22/99)

#### Community Health and Program Services Branch (HCL35)

(1) Provides technical assistance to State health agencies and other Federal, national, and international organizations to plan, implement, and evaluate community-based chronic disease prevention and health promotion programs; (2) develops, implements, and evaluates training in the area of chronic disease intervention and community health promotion for State health departments and other agencies; (3) supports health promotion and disease prevention research conducted at university-based prevention centers; (4) develops chronic disease epidemiology capacity in State health departments through training and support of chronic disease field epidemiologists and other capacity building efforts; (5) provides statistical and programming support to the Division, including assistance in design of data collection instruments, computer programming, and statistical analysis; (6) provides administrative and management support for the branch, including oversight of grants, cooperative agreements, contracts, and reimbursable agreements; (7) ensures the coordination of NCCDPHP internal activities related to Preventive Health and Health Services Block Grant (PHHSBG) programs and develops and administers guidelines, uniform reporting procedures, and evaluation criteria for programs supported by PHHSBG. (Approved: March 19, 2002)

#### Emerging Investigations and Analytic Methods Branch (HCL34)

(1) Conducts epidemiologic research and investigations of cross-cutting emerging scientific issues for NCCDPHP; (2) uses geographic information systems (GIS) to provide spatial and temporal relationships among data; (3) conducts operational research to evaluate the cost-effectiveness or cost-benefit of chronic disease prevention and control technologies and develops and recommends national policy to address issues related to the economics of health care; (4) performs research on racism and its social determinants on health, adverse childhood events, mental health, gene environment interactions, and alcohol; (5) coordinates and provides guidance in the evaluation of community and state-based intervention programs; (6) designs and produces a wide range of visual materials (e.g., slides, overheads, exhibits) for presentations and instructional activities; (7) coordinates Branch activities through the Division with other components of CDC, other Federal, State, and local Government agencies, and other private, public, nonprofit, and international organizations as appropriate. (Approved: March 19, 2002)

#### Division of Diabetes Translation (HCL4)

(1) Plans, directs, and coordinates a program to reduce morbidity, mortality, disability, and costs associated with diabetes and its complications; (2) identifies, evaluates, and implements programs to prevent and control diabetes through the translation of state-of-the-art health care and self-care practices into widespread community practice; (3) in coordination with the Office of Surveillance and Analysis, conducts surveillance of diabetes, its complications, and the utilization of health care and prevention

resources to monitor trends and evaluate program impact on morbidity, mortality, disability, and cost; (4) conducts epidemiologic studies and disseminates findings to identify and evaluate the feasibility and effectiveness of potential prevention and control strategies at the community level; (5) develops clinical and public health guidelines and strategies to form the basis for community interventions; (6) provides technical consultation and assistance to State and local health agencies to implement and evaluate cost effective interventions to reduce morbidity, mortality, and disability; (7) maintains liaison and collaborative relationships with official, private, voluntary agencies, educational institutions, or foreign countries and groups involved in diabetes-related activities; (8) provides technical assistance and consultation to other nations and to the World Health Organization (WHO) as a WHO Collaborating Center.

#### Office of the Director (HCL41)

(1) Establishes and interprets policies and determines program priorities; (2) provides leadership and guidance in budget formulation, program planning and development, program management, and operations of the Division; (3) monitors progress toward achieving Division objectives and assessing the impact of programs; (4) reports accomplishments, future directions, and resource requirements; (5) provides management and support services to the Technical Advisory Committee for Diabetes Translation and community control programs; (6) coordinates Division activities with other components of NCCDPHP and CDC and with other agencies in the public and private sectors; (7) represents the Division at official professional and scientific meetings.

#### Epidemiology and Statistics Branch (HCL42)

(1) Conducts national surveillance of diabetes and its complications and assists state health agencies in establishing and conducting diabetes surveillance systems at the state level; (2) identifies basic and clinical research findings and technologies that have potential to prevent or control diabetes and its complications; (3) designs and conducts evaluations of community-based demonstrations of strategies and technologies to prevent diabetes and its complications; (4) conducts epidemiologic studies to identify high-risk population groups and other risk factors for diabetes and its complications; (5) conducts operational research to evaluate the cost-effectiveness or cost-benefit of diabetes prevention and control technologies and develops and recommends national policy to address issues related to the economics of health care; (6) conducts epidemiologic research to evaluate the diffusion and dissemination of preventive services and the utilization of health care; (7) provides scientific and technical support to divisional staff and state and local health agencies in planning, implementing, and evaluating programs to reduce morbidity and mortality from diabetes; (8) provides information systems support for headquarters operation of the Division; (9) serves as the Division's liaison to the scientific components of CDC, public and private groups, and individuals; (10) maintains communication and coordinates activities with the National Institutes of Health, the Indian Health Service, the Health Resources and Services Administration, other Federal agencies, international health agencies, the Diabetes Research and Training Centers, schools of public health, universities and others. (Approved: 11/10/2003)

#### Program Development Branch (HCL43)

(1) Provides programmatic leadership and support for state-based diabetes programs; (2) identifies, develops, and implements strategies to prevent and control diabetes through translation of state-of-the-art health care and self care practices into widespread community practice and through the application of health systems, community interventions, and health communications research; (3) implements program policies, plans, procedures, priorities, and guidelines to reduce morbidity, mortality, disability, and costs associated with diabetes and its complications; (4) recruits, assigns, and provides technical supervision to field staff working with state and local health departments to implement diabetes prevention and control programs; (5) designs, evaluates, and implements national educational strategies directed toward health care professionals, individuals with diabetes, community leaders, and the general public; (6) develops consensus guidelines for diabetes management educational materials, training courses, and other materials; (7) implements and monitors management information systems for diabetes control programs and facilitates and coordinates the collection of data from research activities; (8) obtains, analyzes, disseminates, and publishes data from state-based diabetes control programs to develop operational strategies for translation of results into improved community practice; (9) provides consultation and guidance on health communication, health systems, and community interventions related to state-based diabetes control efforts; (10) establishes and maintains collaborative relationships



with external partners and groups, including research institutions, schools of public health, medical schools, state health departments, national and voluntary organizations, and others to ensure that the Division's developmental efforts reflect the state-of-the art in diabetes theory and practice; (11) maintains a national database on reimbursement and cost issues relative to diabetes care and management. (Approved 2/5/96)

#### Division of Nutrition and Physical Activity (HCL5)

(1) Provides national leadership to chronic disease prevention and maternal and child health in the areas of nutrition and physical activity; (2) implements systems to track and analyze nutrition problems, physical inactivity, and related risk factors; builds State capacity to collect and utilize surveillance data; (3) builds international, national, State, and local expertise and capacity in nutrition and physical activity through consultation and training; (4) provides technical assistance and other support to enable State and local health agencies to plan, implement, and evaluate nutrition and physical activity programs; (5) contributes to the science base by conducting epidemiologic and intervention studies related to nutrition and physical activity; (6) ensures that both scientific and programmatic efforts span the arenas of policy, environment, communications, social and behavioral interventions; (7) develops and disseminates new methods, guidelines, and criteria for effective nutrition and physical activity programs; (8) collaborates with appropriate Federal and State agencies, international/national/community organizations, and other CDC partners; (9) provides national leadership in health communications to promote nutrition and physical activity and integrate health communications efforts with overall program efforts; (10) facilitates the translation of nutrition and physical activity research findings into public health practice. (Approved: 1/22/99)

#### Office of the Director (HCL51)

(1) Provides direction in establishing Division priorities, strategies, programs, and policies; (2) mobilizes and coordinates partnerships and constituencies to build a national infrastructure for nutrition and physical activity promotion; (3) educates the public and key decision makers about the importance of nutrition and physical activity to public health; (4) ensures that Division activities are coordinated within NCCDPHP and with other CIOs, constituencies, and Federal agencies; (5) monitors progress toward achieving Division objectives and assesses the impact of programs; (6) provides special training and capacity building activities in support of Division programs; (7) provides administrative and management support for Division activities including guidance on the organization of personnel and the use of financial resources; (8) provides leadership to the Division and field staff on health communication efforts to promote nutrition and physical activity. (Approved: 1/22/99)

#### Physical Activity and Health Branch (HCL52)

(1) Conducts epidemiologic research related to physical activity, health, and the prevention of chronic disease; (2) develops and evaluates disease prevention and health promotion interventions involving physical activity; (3) develops monitoring and tracking systems for physical activity behaviors; (4) provides leadership in the development of guidelines for effective chronic disease prevention and health promotion strategies through physical activity; (5) develops and produces communication tools and public affairs strategies related to physical activity and health in collaboration with the Division's communications team; (6) provides technical assistance to State and local health agencies in planning, establishing, and evaluating physical activity promotion strategies; (7) translates physical activity and exercise research findings into public health practice; (8) disseminates findings from epidemiologic research and program evaluations through publications in the scientific literature; (9) collaborates with appropriate groups internal and external to CDC. (Approved: 1/22/99)

#### Chronic Disease Nutrition Branch (HCL56)

(1) Designs, implements, and evaluates surveillance activities, epidemiologic studies, and intervention projects related to chronic disease nutrition problems and risk factors; (2) develops and coordinates State-based dietary surveillance relating to chronic disease nutrition problems and risk factors, and builds State capacity to collect and utilize surveillance data; (3) provides assistance, consultation, and training to State, local, and international agencies to prevent and control chronic disease and relevant risk factors; (4) analyzes, interprets, and disseminates data from surveys, surveillance activities, and epidemiologic studies related to chronic disease nutrition problems and related risk factors; (5) develops and disseminates guidelines for chronic disease nutrition assessment, intervention, and surveillance; (6)

coordinates and/or collaborates with appropriate Federal agencies and national organizations to strengthen and extend chronic disease nutrition surveillance, epidemiology, and intervention activities; (7) develops new methods, techniques, and criteria for the assessment of chronic disease nutrition problems and related risk factors in the United States and other countries; (8) coordinates and/or collaborates with other divisions in NCCDPHP to develop and strengthen the chronic disease nutrition components of their programs, as appropriate. (Approved: 1/22/99)

#### Maternal and Child Nutrition Branch (HCL57)

(1) Designs, implements, and evaluates epidemiological studies and intervention projects related to nutritional and behavioral risks in maternal and child populations; (2) designs, implements, and evaluates epidemiologic studies and intervention projects related to micronutrient nutrition, especially iron; (3) develops and coordinates State-based maternal and child nutrition surveillance and surveys, and builds State capacity to carry out surveillance activities; (4) provides assistance, consultation, and training to local, State, and international agencies to prevent and control adverse maternal and child health outcomes related to nutritional and behavioral risk factors; (5) analyzes, interprets, and disseminates data from surveys, surveillance activities, and epidemiologic studies related to health and nutrition in domestic and international maternal and child populations; (6) develops and disseminates new methods, techniques, guidelines, and criteria for nutrition assessment, surveillance, and intervention in domestic and international maternal and child populations; (7) coordinates and/or collaborates with appropriate Federal agencies and national/international organizations to develop and strengthen maternal and child nutrition programs; (8) coordinates and collaborates with other divisions in NCCDPHP and other CDC CIOs to develop and strengthen the maternal and child nutrition components of their programs, as appropriate. (Approved: 1/22/99)

#### Division of Reproductive Health (HCL6)

(1) Proposes appropriate goals and objectives, identifies problems and needs, and recommends priorities for reproductive health program activities that can contribute to the reduction of preventable morbidity and mortality due to selected, non-environmentally, non-occupationally related adverse reproductive outcomes; (2) conducts public health surveillance in coordination with the Office of Surveillance and Analysis, epidemiologic investigations, and evaluations of health problems and programs related to contraception, pregnancy, human reproduction, and infancy; (3) develops and implements intervention programs to prevent and/or resolve problems related to reproductive, infant, and maternal health, and selected adverse reproductive outcomes; (4) conducts evaluation of service programs and service delivery intended to improve the organization and delivery of reproductive health services, including certain family planning services; (5) confers, consults, collaborates with, and provides technical assistance and training to local, State, and other Federal agencies, and appropriate nongovernmental organizations on selected reproductive health problems and on programs to resolve these problems; (6) consults, collaborates with, and provides technical assistance to international governmental and nongovernmental organizations on bilateral and multilateral epidemiologic investigations and demonstration projects in reproductive health, including surveys and assessments, improvement of service delivery, and reproductive risk assessment; (7) serves as a primary Federal resource for technical assistance and expertise in family planning evaluation methodologies and reproductive health epidemiology; (8) serves as a World Health Organization (WHO) Collaborating Center in Perinatal Care and Health Service Research in maternal and child health, and as a WHO Collaborating Center for Research Training in Human Reproduction; (9) coordinates Division activities with other NCCDPHP components, other CDC organizations, other PHS agencies, and the OASH, including the Deputy Assistant Secretary for Population Affairs, as appropriate.

#### Office of the Director (HCL61)

(1) Establishes and interprets policies; (2) determines program priorities; (3) plans Division activities including the organization of personnel and the use of financial resources; (4) establishes standards for quality control of studies and pilot projects; (5) monitors progress toward achieving program objectives; (6) assesses the impact of the Division's activities on improved pregnancy outcomes and improved reproductive health of adults; (7) reports accomplishments, future directions, and resource requirements; (8) coordinates activities within the Division and other units of NCCDPHP and CDC and with other agencies in the public and private sectors; (9) represents the Division at official professional and scientific meetings.

### Maternal and Infant Health Branch (HCL63)

(1) Conducts epidemiologic and demographic surveillance, research, and field investigations to study health problems, programs, and policies related to maternal, infant and child health; (2) consults with other components of NCCDPHP and CDC to address maternal, infant and child health-related issues and problems in programs and projects where reproductive health is a relevant outcome; (3) collaborates with and provides technical assistance, consultation, and training to local, State, Federal, and international agencies, universities and appropriate governmental and non governmental organizations on maternal, infant and child health-related health problems; (4) collaborates with and provides technical assistance and consultation to international governmental and non governmental organizations on bilateral and multilateral research and demonstration projects, including demographic and reproductive health surveys and epidemiologic studies; (5) serves as a primary Federal resource of technical assistance and expertise in the epidemiology and behavioral research of maternal, infant and child health; (6) serves as a Federal resource for technical assistance and expertise in demographic analytical techniques for evaluating maternal, infant and child health and family planning programs; (7) consults with other components of NCCDPHP and CDC in areas requiring expertise in demographic and survey techniques and in knowledge of population processes; (8) provides technical assistance in linkage of surveys with program activities, including forecasting and reproductive health commodity logistics; (9) collaborates and consults with other components of NCCDPHP and CDC to address issues and problems related to violence against women in programs and projects where reproductive health is a relevant outcome. (Approved: August 29, 2002)

### Applied Sciences Branch (HCL64)

(1) Assists local, State and tribal public health agencies in building their maternal and child health epidemiology and data capacity to effectively use information for public health actions; (2) conducts population-based surveillance of maternal behaviors and experiences that occur before, during, and after pregnancy; (3) provides leadership in the development of research, surveillance, programs and evaluation related to the prevention of unintended pregnancy; (4) promotes adolescent reproductive health and the application of science-based approaches for the prevention of teen pregnancy; (5) assists domestic and international health agencies in health services management, health services research, and translation of findings by providing technical assistance, including training, analytical assistance, and consultation; (6) coordinates CDC's activities related to reproductive health for refugees and displaced persons and provides a focal point for such requests from non-governmental organizations, UN agencies, and other domestic and international organizations; (7) coordinates CDC's activities relating to maternal smoking, including promoting smoking cessation during pregnancy and conducting cost studies; (8) conducts epidemiologic studies, research, and field investigations to analyze health problems, programs, and policies related to the delivery of reproductive health services; (9) coordinates activities that address the content and payment of women's reproductive health care services from public agencies and private organizations, including employers and managed care organizations; (10) proposes and participates in the development, implementation, and evaluation of demonstration service programs and projects. (Approved: August 29, 2002)

### Information Technology, Statistics, and Surveillance Branch (HCL65)

(1) Provides statistical and computer support to the Division including statistical consultation, systems analysis, technical assistance, and resource identification; (2) evaluates and implements new and established statistical methods, survey designs, information systems, and research strategies; (3) determines and recommends software and information technology solutions for Division programs and projects; (4) consults and interfaces with components of NCCDPHP and CDC regarding research designs and statistical and computer techniques for programs and projects addressing reproductive health; (5) provides technical assistance and training to local, State, national, and international health organizations in systems development; provides data collection and statistical analysis; and collaborates on efforts to disseminate results; (6) serves as a primary Federal resource of expertise in statistical methodology and information technology for conducting epidemiologic and demographic research and surveillance related to reproductive health and family planning services evaluation; (7) evaluates established and implements new surveillance methods, surveillance mechanisms, and surveillance systems. (Approved: 11/10/2003)

### Women's Health and Fertility Branch (HCL66)

(1) Conducts surveillance and research on issues involving fertility and infertility, including the environmental, physiological and psycho social determinants of fertility; and the acceptability, efficacy and safety of fertility regulation technology such as methods of contraception and infertility treatment (including assisted reproductive technology), evaluating the impact of such technology on the health of women and their children; (2) conducts surveillance and research on the health consequences of sexual and reproductive behavior, infertility, pregnancy, contraception, and hormone replacement therapy, which may extend beyond the reproductive years, and on reproductive health issues throughout the life span, including menopause, hysterectomy, and reproductive cancers; (3) conducts research on the relationship between contraception and HIV/STD and develops and coordinates efforts to integrate HIV/STD prevention with family planning, and to prevent vertical transmission of HIV/STD; (4) develops epidemiologic and behavioral research methods for the study of reproductive health issues; (5) designs and evaluates medical and behavioral interventions to prevent unintended pregnancy and HIV/STD and to promote reproductive health in individuals and communities; (6) develops, proposes, and evaluates recommendations and guidelines for reproductive health practice; (7) leads the Division in developing appropriate training in epidemiologic and behavioral research methods and conducts training to facilitate the evaluation of different reproductive health strategies and measures; (8) provides technical assistance and consultation to domestic and international governmental and non governmental organizations on epidemiologic and behavioral research as they pertain to contraception, infertility, hormone replacement, HIV/STD prevention and related health outcomes. (Approved: August 29, 2002)

#### Office on Smoking and Health (HCL7)

(1) Administers a program to inform Americans about the dangers of tobacco use in order to reduce death and disability due to smoking and smokeless tobacco use; (2) promotes and stimulates research on the determinants and health effects of smoking and smokeless tobacco use; (3) coordinates all PHS research and educational programs and other HHS activities related to tobacco and health; (4) establishes and maintains liaison with other Federal agencies, private organizations, State and local governments, and international agencies on matters related to tobacco and health; (5) serves as a clearinghouse for the collection, organization, and dissemination of information on all aspects of tobacco and health; (6) develops materials on tobacco use in relation to health; (7) provides assistance for educational programs on smoking and health; (8) produces Congressionally mandated reports to Congress; (9) conducts surveys, and coordinates and conducts epidemiologic studies related to tobacco use and tobacco control; (10) provides staff support for a Congressionally mandated Federal advisory committee on smoking and health; (11) pursuant to Public Laws 98-474 and 99-252, collects, maintains, and analyzes information provided by the tobacco industry on cigarette additives and smokeless tobacco additives and nicotine content; (12) serves as a World Health Organization (WHO) Collaborating Center on Smoking and Health; (13) serves as the lead DHHS organization for the Objectives for the Nation related to smoking and health; (14) provides staff support to the Surgeon General on activities related to smoking and health.

#### Office of the Director (HCL71)

(1) Manages, directs, coordinates, and evaluates the activities of the Office on Smoking and Health; (2) develops goals and objectives for the Office; (3) provides leadership, scientific oversight, and guidance in program planning and development; (4) coordinates the development of policy related to tobacco use and health in CDC, PHS, and HHS; (5) coordinates assistance provided by OSH to other CDC components; Federal, State, and local government agencies; the private sector; and other nations; (6) stimulates additional research and program activity related to tobacco use and health by other Federal agencies, international organizations, and public and private organizations; (7) coordinates the OSH public information program, technical information program, and surveillance and epidemiologic projects and studies; (8) provides program management and administrative support services; (9) as required by Public Law 98-474, produces Biennial Status Report to Congress; (10) serves as the lead for the Tobacco and Health Objectives for the Nation; (11) collects, maintains, and analyzes information provided by the tobacco industry on cigarette additives and smokeless tobacco additives and nicotine content; (12) provides staff support for a Congressionally-mandated Federal advisory committee on smoking and health; (13) serves as the principal adviser to the Surgeon General of the U.S. Public Health Service on all activities related to tobacco use and health.

#### Epidemiology Branch (HCL72)

(1) Conducts epidemiologic surveillance, research, and field investigations related to tobacco prevention

and control; (2) analyzes existing data sources, primarily national surveys conducted by the Office on Smoking and Health and other Federal agencies; (3) plans, develops, and maintains data tapes of State-based epidemiologic surveillance systems in collaboration with State and other CDC components; (4) provides technical and scientific assistance to researchers, health departments, and other health professionals interested in performing specialized data collecting or analysis relating to smoking and tobacco use; (5) reviews and evaluates epidemiologic studies on the health effects and determinants of tobacco use; (6) develops new methods and techniques for assessing the health effects and determinants of tobacco use; (7) monitors trends in tobacco use prevalence, economic costs, morbidity, and mortality attributable to tobacco use; (8) conducts joint projects with Federal agencies, voluntary organizations, State health departments, and others involved in tobacco prevention and control; (9) develops and produces publications on current epidemiologic science of tobacco use and control. (Approved: 7/7/94)

#### Health Communications Branch (HCL76)

(1) Plans, develops, and conducts programs to inform media, researchers, health professionals, policy-makers and the public about the health consequences of tobacco use; (2) provides technical guidance, assistance, and consultation to health professionals in the planning, development, and implementation of information programs at the national, State, and local levels; (3) serves a leading role in providing the press, health professionals, and the general public with information on tobacco prevention and control issues; (4) produces, distributes, and evaluates educational materials and conducts counteradvertising campaigns to support tobacco prevention and control; (5) develops and maintains a Technical Information Center, including an on-line bibliographic database of materials relative to the OSH mission; (6) manages production of the annual Surgeon General's report and other Congressionally-mandated reports on the health consequences of tobacco use; (7) conducts joint information campaigns with other Federal agencies, voluntary health organizations, State health departments, and others; (8) provides reference and referral services for OSH staff and constituents in need of scientific and other technical information; (9) plans and conducts special Departmental-wide initiatives addressing high-risk groups such as minorities and youth; (10) prepares and distributes information products such as fact sheets, current awareness services, bibliographies, and legislative updates in both print and electronic formats; (11) produces speeches for CDC, PHS, and Departmental officials relating to tobacco; (12) responds to public inquiries and shares general information on tobacco use and tobacco cessation; (13) manages the communication functions of OSH through activities such as maintaining slide and video libraries, managing mailing lists management, and providing conference exhibits; (14) collaborates with other groups within CDC, PHS, and HHS and with other Federal agencies, as well as other professional, voluntary, international, and professional health organizations. (Approved: 7/7/94)

#### Program Services Branch (HCL77)

(1) Provides technical consultation, assistance, and training to local, State, regional, and national organizations and agencies in all components of tobacco prevention and control; (2) monitors and tracks program activities in State-based chronic disease prevention and control programs; (3) recruits, trains, and supervises field staff working with State and local health departments and local, State, regional, and national organizations and agencies to implement tobacco control programs; (4) coordinates and provides consultation to local, State, regional, and national conferences that facilitate planning, development, and implementation of tobacco control initiatives; (5) assists in the design, implementation, and monitoring of legislative activity and tobacco control efforts in each State; (6) coordinates the collection of data from State and local programs to monitor national progress toward PHS's Healthy People 2000 tobacco objectives; (7) serves as a World Health Organization (WHO) Collaborating Center on Smoking and Health. (Approved: 7/7/94)